

COMMUNITY HEALTH NEEDS ASSESSMENT

TOP HEALTH PRIORITIES

- 1 Access to healthcare services
- 2 Injury and safety (i.e. suicide, violence)
- 3 Nutrition, physical activity, and obesity

COLLABORATION EXAMPLE

"Turner House has collaborated with Children's Mercy on many programs over the past two years, and particularly in the areas of pediatric obesity management and obesity prevention. Turner House developed its obesity prevention and Healthy Lifestyles Weight Management program for children diagnosed as obese using the 12345 Fit-Tastic curriculum developed by Children's Mercy."

ADDRESSING COMMUNITY HEALTH PRIORITIES

"Turner House is addressing the priority of providing access to healthcare services including the importance of medical home, hours, transportation, appointment availability and wait times, Medicaid reimbursement and cultural competence. As a nationally recognized level 3, Patient-Centered Medical Home clinic, Turner House meets or exceeds performance standards for Patient-Centered Access; Team-Based Care; Population Health Management; Care Management and Support; Care Coordination; and Performance Management and Quality Improvement."

COMMUNITY PARTNERSHIPS

HOSPITAL "active relationship for patient referrals to specialists and use of nurse advice line"

HEALTH DEPARTMENT "refers patient families for breast feeding support and car seats... coordinates for patients at risk of communicable diseases"

MENTAL HEALTH CENTER "screen, diagnose, short-term counseling on-site; refer patients in crisis or requiring specialty/long-term care"

PRIVATE PRACTICES "specialty medical and dental care"

OTHER "community center, grocery store, Head Start, WIC, public and private schools..."

CARE COORDINATION & PATIENT-CENTERED MEDICAL CARE

"October 2015, Turner House received renewal recognition by the National Committee for Quality Assurance (NCQA), as a Level 3, Patient-Centered Medical Home under 2014 standards."

USING GRANT FUNDS TO IMPROVE PATIENT CARE

"Grant funds will be used to improve patient outcomes by helping to fund staff positions with responsibilities for patient outcome improvement. Three pediatric provider-led care teams will provide chronic care management and care coordination to reduce the impact of the most frequently occurring patient conditions such as asthma, obesity, and dental caries, and maintain age specific compliance with well-child physicals and immunizations."